NATIONAL TENANT NETWORK

# Rental Application

RE/MAX ACTION REALTY

1126 Horsham Rd Maple Glen, PA 19002
Tel: (215)358-1100 • Fax: (215) 358-1104

| **Last Name** | **First Name** | **M.I.** | Co-Applicant Last Name | First Name | M.I. |
|---|---|---|---|---|---|
| | | | | | |

| **Date of Birth** | **Social Security Number** | **Home Telephone** | **Date of Birth** | **Social Security Number** | **Home Telephone** |
|---|---|---|---|---|---|
| / / | - - | ( ) - | / / | - - | ( ) - |
| E-Mail Address | | Mobile Telephone ( ) - | E-Mail Address | | Mobile Telephone ( ) - |

| **Current Street Address** | **City** | **State** | **Zip Code** | Co-Applicant Current Address (if different) | City | State | Zip Code |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| Previous Street Address | City | State | Zip Code | Co-Applicant Previous Address (if different) | City | State | Zip Code |
| | | | | | | | |

| **Length of Residence at Current Address** | Ever Filed for Eviction? | Own or Rent? | Length of Residence at Current Address | Ever Filed for Eviction? | Own or Rent? |
|---|---|---|---|---|---|
| ___ months | ☐ Yes ☐ No | ☐ Own ☐ Rent | ___ months | ☐ Yes ☐ No | ☐ Own ☐ Rent |

## *Present Housing Information*

| Landlord or Agent Name | Landlord Telephone Number | | Co-Applicant Landlord or Agent Name | Landlord Telephone Number | |
|---|---|---|---|---|---|
| | ( ) - | | | ( ) - | |
| Reason for Leaving | Length of Rental | Monthly Rent | Reason for Leaving | Length of Rental | Monthly Rent |
| | ___ months | | | ___ months | |

## *Employment / Income Information*

| **Present Employer Name** | **Position** | | Co-Applicant Employer Name | Position | |
|---|---|---|---|---|---|
| | | | | | |
| **Supervisor Name** | **Telephone Number** | | Supervisor Name | Telephone Number | |
| | ( ) - | | | ( ) - | |
| Employer Address | City | State Zip Code | Employer Address | City | State Zip Code |
| | | | | | |
| **Employed** ☐ Check Here if Not Employed | **Salary / Wages** | *per* ☐ month ☐ year | Employed ☐ Check Here if Not Employed | Salary / Wages | *per* ☐ month ☐ year |
| From To | | | From To | | |
| Other Income ☐ SSI ☐ Disability ☐ Retirement ☐ Other | Amount | *per* ☐ month ☐ year | Other Income ☐ SSI ☐ Disability ☐ Retirement ☐ Other | Amount | *per* ☐ month ☐ year |

## *Banking Information*

| Bank Name | Telephone Number | | Name | Telephone Number | |
|---|---|---|---|---|---|
| | ( ) - | | | ( ) - | |
| Account Number | Account Type ☐ Checking ☐ Savings | Ever Filed for Bankruptcy? ☐ Yes ☐ No | Account Number | Account Type ☐ Checking ☐ Savings | Ever Filed for Bankruptcy? ☐ Yes ☐ No |

## *Emergency Contact Information*

| Name | Telephone Number | | Name | Telephone Number | |
|---|---|---|---|---|---|
| | ( ) - | | | ( ) - | |
| Address | Relationship | | Address | Relationship | |

## *Other Information*

| Car Year / Make / Model | License Plate State / Number | | Car Year / Make / Model | License Plate State / Number | |
|---|---|---|---|---|---|
| / / | | | / / | | |
| Other Residents (Names / Ages) | | | Other Residents (Names / Ages) | | |
| Have you ever been convicted of a crime? ☐ Yes ☐ No If "Yes", #: ____ | If "Yes", Date of Most Recent Conviction? | Nature of Conviction | Have you ever been convicted of a crime? ☐ Yes ☐ No If "Yes", #: ____ | If "Yes", Date of Most Recent Conviction? | Nature of Conviction |

## *Applicant Signature(s)*

**RE/MAX Action Realty is hereby authorized to obtain any and all information they deem necessary for the processing of my rental application, including but not limited to credit reports, civil and criminal background checks, prior rental history, current and past employment history, motor vehicle records, etc. I understand that the rental application fee is non-refundable even if my rental application is denied and that the information on this form may be maintained in a tenant data base for up to 5 years after I vacate the property. I hereby authorize RE/MAX Action Realty to release any of the information that it obtains to the prospective landlord and any dual or cooperating real estate agent. I represent and certify that the information that I have furnished to RE/MAX Action Realty and the prospective landlord is true.**

***Applicant:*** **X** ***Date:*** ***Co-Applicant:*** **X** ***Date:***

Items in **BOLD** are **REQUIRED**

| *OFFICE USE ONLY* | | |
|---|---|---|
| ***NTN Access Number:*** | *Address/Unit Applied for:* | ***Monthly Rent*** *Amount for unit applicant is applying for:* ***$*** |
| *Date Screened:* | *Projected Move-In Date:* | *Apartment / Unit Type:* |

**Submit above information to NTN**
**Phone: (800) 422-8299 Fax: (888) 885-7528 Web: *www.ntnonline.com***